

# Cardiovascular Disease in New Hampshire



Issue Brief – March, 2007

#### WHAT IS CARDIOVASCULAR DISEASE?

Cardiovascular disease is a term used to refer to a broad spectrum of diseases and conditions, all involving the heart or blood vessels. The most recognized of these are heart disease and stroke.

Heart disease is the leading cause of death for both women and men in the United States and in New Hampshire (NH). Nearly 700,000 people die of heart disease in the U.S. annually. Each year, heart disease is estimated to cost more than \$250 billion, including health care services, medications, and lost productivity. (1)

Stroke is the third leading cause of death in the United States and in NH. Over 160,000 people die each year from stroke in the United States. Among survivors, stroke can cause significant disability including paralysis, speech and emotional problems. According to the American Heart Association, as a result of stroke we lost almost \$57 billion in both direct and indirect costs in 2005.<sup>(2)</sup>

# WHAT IS THE BURDEN OF HEART DISEASE AND STROKE IN NH?

Based on the findings of the 2005 NH Behavioral Risk Factor Surveillance System (BRFSS), 4.5% of adults in NH reported having been told they have angina or coronary heart disease, 3.8% have been told they had a heart attack or myocardial infarction and 2.6% have been told they had a stroke. Based on the mortality data, 2,093 NH residents died of coronary heart disease and 536 died of cerebrovascular disease or stroke in 2003. In

2004, overall 2,436 hospitalizations occurred in NH because of heart attack and 2,034 hospitalizations took place because of stroke.

#### WHAT ARE THE RISK FACTORS FOR HEART DISEASE AND STROKE?

High cholesterol, high blood pressure, tobacco use and diabetes are several of the main risk factors for cardiovascular disease. Based on the 2005 BRFSS, the proportion of adults who have been told they have high blood pressure was 23.3%, and 35.3% of those who have ever had their cholesterol checked had been told it was high. Approximately, 20.4% of NH adults are current smokers and 6.5% have diabetes. Contributing factors to the development of heart disease and stroke also include overweight, obesity, and physical inactivity. For some individuals heredity may play a role. About 60% of NH adults were overweight or obese in 2005, and the proportion of adults who reported no leisure-time physical activity in the past month was 21.6%.

### CAN HEART DISEASE AND STROKE BE PREVENTED?

In addition to living a healthy lifestyle, the risks for heart disease and stroke can be reduced by proper control of high blood pressure and blood cholesterol. In 2005, about 81.0% of NH residents reported having their blood cholesterol checked in the past five years and 77.9% of those with high blood pressure reported currently taking their prescribed medication.

#### **ARE THERE GEOGRAPHIC**

- Division for heart disease and stroke prevention fact sheet, available at <a href="http://www.cdc.gov/heartdisease/about.htm">http://www.cdc.gov/heartdisease/about.htm</a>, accessed on 07/18/06
- Division for heart disease and stroke prevention fact sheet, available at: <a href="http://www.cdc.gov/dhdsp/library/fs\_strokesigns.htm">http://www.cdc.gov/dhdsp/library/fs\_strokesigns.htm</a>, accessed on 07/06/06

# DIFFERENCES IN THE PREVALENCE OF HEART DISEASE AND STROKE?

Analysis of BRFSS data assessed the prevalence of cardiovascular disease and multiple risk factors at the county level. Prevalence of coronary heart disease, myocardial infarction and stroke as well as the six major risk factors are depicted in the table.

# WHERE CAN I GET MORE INFORMATION?

For more information on the data presented contact: NH Division of Public Health Services

29 Hazen Drive, Concord, New Hampshire 03301-6504

Phone: 1-603-271-4931 or 1-800-852-3345

ext. 4931

The full report is available at the department's

website: www.dhhs.nh.gov/DHHS.

Region	Prevalence of Coronary Heart Disease	Prevalence of Myocardial Infarction	Prevalence of Stroke	Prevalence of Elevated Cholesterol	Prevalence of Hypertension	Prevalence of Overweight and Obesity	Prevalence of No Leisure Time Activity	Prevalence of Current Smokers	Prevalence of Diabetes
Belknap	2.2	1.7	2.0	36.3	25.5	56.7	18.9	22.6	4.2
	0.9-3.4	0.3-3.2	0.7-3.4	30.5-42.1	20.6-30.3	50.2-63.2	14.5-23.2	17.2-28.0	2.2-6.3
Carroll	4.8	5.7	2.0	39.6	26.0	57.9	22.1	20.8	5.6
	2.4-7.3	2.8-8.6	0.6-3.4	32.8-46.3	20.5-31.6	51.5-64.3	16.7-27.5	15.7-25.9	3.0-8.2
Cheshire	3.2	2.9	2.1	30.7	23.3	59.4	17.7	20.8	6.7
	1.8-4.7	1.4-4.4	0.8-3.4	26.0-35.5	19.4-27.3	54.3-64.6	13.9-21.6	16.8-24.9	4.4-9.0
Coos	8.1	8.8	8.5	41.1	26.7	61.2	29.6	26.2	12.5
	4.4-11.8	5.0-12.6	4.8-12.3	34.2-48.0	21.2-32.2	54.8-67.7	23.8-35.3	20.6-31.7	8.3-16.6
Grafton	3.5	2.6	3.0	34.1	21.9	56.1	17.6	17.0	7.4
	2.1-4.9	1.4-2.9	1.5-4.4	28.9-39.2	17.9-25.9	50.3-61.8	14.0-21.3	12.8-21.1	4.9-10.0
Hillsborough	5.2	3.4	2.6	35.6	21.7	58.9	24.2	20.7	6.8
	4.0-6.5	2.4-4.3	1.6-3.5	32.6-38.6	19.3-24.0	55.7-62.0	21.6-26.8	18.1-23.3	5.3-8.3
Merrimack	5.6	3.9	3.3	38.0	25.4	65.3	19.6	18.2	5.1
	3.8-7.4	2.6-5.2	1.5-5.1	33.2-42.7	21.6-29.2	60.7-69.9	16.1-23.1	14.2-22.1	3.5-6.7
Rockingham	3.1	3.8	1.5	33.9	22.1	60.9	20.2	20.4	5.6
	1.9-4.2	2.4-5.2	0.7-2.3	30.5-37.3	19.4-24.9	57.1-64.7	17.4-23.1	17.3-23.5	4.2-7.1
Strafford	5.6	5.1	3.3	35.6	26.0	60.9	23.7	22.1	7.6
	3.7-7.5	3.2-7.0	1.9-4.6	30.9-40.3	22.0-30.0	56.3-65.5	19.7-27.7	18.2-26.0	5.5-9.8
Sullivan	4.9	4.2	2.8	31.5	23.7	57.2	20.9	19.3	7.5
	2.6-7.2	2.0-6.4	0.7-4.9	25.5-37.4	18.7-28.8	50.8-63.5	15.8-26.0	14.2-24.4	4.6-10.4
New	4.5	3.8	2.6	35.3	23.3	60.0	21.6	20.4	6.5
Hampshire	3.9-5.1	3.3-4.3	2.2-3.1	33.8-36.8	22.1-24.5	58.4-61.6	20.4-22.8	19.1-21.7	5.8-7.1